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Commission for Social Development
Forty-eighth session
3-12 February 2010
Item 3 (a) of the provisional agenda*
Follow-up to the World Summit for Social Development and the twenty-fourth special session of the General Assembly: priority theme: social integration

Statement submitted by the World Youth Alliance, a non-governmental organization in general consultative status with the Economic and Social Council

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

* E/CN.5/2010/1.

09-62429 (E) 311209

Please recycle

Statement

1. Social integration is a process whereby all members of society live and work together for the common good. This process can best be understood as a commitment to solidarity. Since solidarity is the foundation for sustainable development and the building of free, just and peaceful societies, the World Youth Alliance welcomes the opportunity to continue its review of "social integration" as the theme of the forty-eighth session of the Commission on Social Development.

2. This year's theme of "social integration" can be further explored if we understand the phrase to mean "social cohesion". As stated by some countries at the forty-seventh session, social integration seems to presume a "top-down" approach whereby States parties force or coerce integration. The word "cohesion" presumes a more organic process, whereby people freely choose to live together in solidarity with encouragement from the State. This is a more appropriate expression of the international community's desires in terms of social development.

Solidarity

3. We, young people from all regions of the world, commit to living and promoting solidarity in all human relationships. Recalling that the intrinsic dignity of each person is the foundation of all just human interactions, and recalling that this dignity is inalienable and cannot be mitigated in any degree; we affirm that every person is free, possessing the power to choose to act in accordance with the reality of the dignity of all persons. Without an understanding that all human beings have intrinsic worth, social cohesion is impossible.

4. In the light of this understanding of the human person and human relationships, we particularly commit ourselves in solidarity to all those who live in need, experience the vulnerability and hardships of war, famine, disease or social unrest and suffer the poverty of hopelessness. In keeping with this commitment, we have addressed the theme of social cohesion in the context of young people, disabled persons and families. The World Youth Alliance joins the international community in its commitment to encourage social cohesion, especially with members of marginalized groups, and to foster an environment that enables integral development.

Youth

5. Global statistics on the status of young people highlight the need to integrate youth into any development agenda. According to the *World Youth Report (2005)*, youth, defined as persons aged 15 to 24, constitute approximately 18 per cent of the total global population (1.1 billion), and youth and children together, account for nearly 40 per cent of the world's population. In many countries of the world, particularly in the developing world, there is a youth majority with the creative potential to transform society.

6. Owing to poverty and the associated absence of adequate health care, education and employment opportunities, much of the creative potential of young people is lost. Approximately 238 million young people live in extreme poverty, and of these about 133 million are illiterate. Youth comprise approximately 41 per cent of the world's unemployed people. Today millions of adolescents, particularly girls,

also face the prospect of incomplete education, which increases their chances of living in poverty, as well as contracting infectious diseases.

7. We call on States and civil society to invest in and strengthen basic health care, which will allow all members of society to live healthier lives and free them to develop their talents and contribute to the common good. Improvements in basic health care will also reduce the caregiving responsibilities of many young people, particularly in the developing world, and prevent interruptions in their formal education.

8. Finally we ask the international community to show solidarity with families, the greatest influence in the lives of young persons, and to partner with families and their communities to create optimal conditions for the integral development of youth.

9. Concretely, we recommend that Member States:

(a) Fulfil commitments to ensure access to primary and secondary education. They should also work in partnership with civil society to strengthen domestic institutions of higher education and to make university education and vocational training more accessible and affordable. The role of parents and families as the first educators of individuals needs to be respected. Families should be recognized as a critical structure for the continual growth and education of young people;

(b) Introduce, in partnership with civil society, families and communities, programmes that provide alternative educational opportunities for those children and youth who are most vulnerable, or the most marginalized;

(c) Develop policies, especially in developing countries, in collaboration with the private sector, that enable the youth to take an active role in the workforce through training programmes and internships.

Disabled persons

10. Disabled people represent a significant percentage of the global population (approximately 10 per cent) and evidence suggests that persons with disabilities are disproportionately represented among the world's poor. According to a 2008 report of the Economic and Social Council, there are approximately 650 million persons with disabilities in the world. An estimated 80 per cent of these persons live in developing countries, many in conditions of poverty. In developed countries, persons with disabilities are subjected to discrimination that limits their participation in society. Too often Governments and communities fail to provide for the special health care and education services disabled persons need for their integral development.

11. The problem of poverty and exclusion of disabled persons begins with harmful cultural attitudes that see the disabled as undesirable members of society; such attitudes exist in both developed and developing countries. In many countries, genetic diagnosis and prenatal screening technologies are used to identify persons with disabilities prior to birth; these individuals are frequently targeted for termination based solely on their disability. This practice ignores the intrinsic dignity and worth of disabled persons and must be discouraged by the Commission and recognized as a violation of human rights.

12. Solidarity with disabled persons requires an appreciation of their unique gifts and contributions to society as persons. We call on Governments and civil society to establish policies and structures that ensure the integration and participation of people with disabilities in mainstream economic, social and political life. Such policies and structures would address the special health, educational and personal development needs of persons with disabilities and support those who care for them, in particular their families and communities.

13. Concretely, we recommend that Member States:

(a) Develop programmes, in collaboration with civil society, to encourage positive cultural attitudes relating to persons with disabilities. These programmes should offer support and resources to the families and other persons who provide care to persons with disabilities;

(b) Encourage educational opportunities suited to the needs of disabled persons in order to foster their integration in society;

(c) Protect persons with disabilities and other vulnerable members of society from discriminatory practices that deny them their human rights, in particular the use of medical technologies to diagnose disabilities in order to terminate the life of disabled persons before birth. Such practices must be clearly and forcefully condemned by this Commission;

(d) Fulfil their international commitments in the areas of health care, infrastructure, good governance and security and make provisions for the special needs of the most vulnerable members of society.

Families

14. Families sustain society and give life to the next generation. As the fundamental unit of society, the family ensures the sustainability of civilization and culture. It takes on essential tasks in the care of all, especially the weakest and most vulnerable. At its best, the family exemplifies intergenerational solidarity and its failure has tragic consequences for its members, particularly for children, and increasingly for older persons.

15. We call upon States to partner with families and communities in addressing the development needs of socially marginalized persons. Such a partnership requires the creation of employment opportunities and the elimination of discriminatory employment practices, particularly against older persons and women. It also requires the international community to fulfil its commitments in the areas of health care, education, infrastructure, good governance and security. Families, particularly those in poverty, disproportionately bear the effects of gaps in these key development areas.

16. Concretely, we recommend that Member States:

(a) Partner, in coordination with civil society actors, with families, particularly in countries facing rapid population ageing, to develop programmes and resources that will facilitate home-based care and foster intergenerational solidarity;

(b) Develop economic structures that do not penalize individual families for choices in the provision of educational and other developmental needs of their

children and in meeting and providing for the needs of older persons and the disabled;

(c) Develop policies, in partnership with civil society, that will promote economic growth, job creation and access to basic health care and education, particularly for families in rural areas.

17. All persons have an important contribution to make to the human community and many are not afforded the opportunity to do so. Social cohesion is critical for the integral development and well-being of all members of society, particularly youth, the disabled, older persons and families living in poverty.

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Item 3 (a) of the provisional agenda*
Follow-up to the World Summit for Social Development and the twenty-fourth special session of the General Assembly: priority theme: social integration

Statement submitted by Yayasan Cinta Anak Bangsa (Loving the Nation's Children Foundation), a non-governmental organization in special consultative status with the Economic and Social Council

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

* E/CN.5/2010/1.

09-62389 (E) 291209

Please recycle

Statement

The YCAB way: a holistic approach towards a drug-free Indonesia

1. Yayasan Cinta Anak Bangsa (YCAB) is an independent non-profit social foundation started in August 1999. Founded out of concern at the increasing incidence of drug abuse among Indonesia's youth, YCAB has focused mainly on primary drug prevention in schools and communities.

2. With the three strategic pillars of YCAB — promoting a healthful lifestyle through drug prevention and education for in-school children; Rumah Belajar, the Learning House for school dropouts and street children; and community development — we have faith that our path towards a drug-free Indonesia has become more holistic and structured.

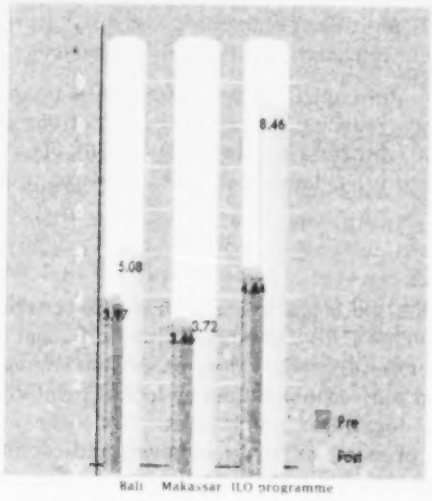
Drug prevention and education in schools

3. In 10 years, YCAB has reached more than 871,085 young people in 10 cities across Indonesia. In 2008 alone, 367,001 young people were reached and trained as "change agents" through Youth against Drug Abuse (YADA) clubs. This programme has covered 1,394 schools, in eight major cities in the Jabodetabek area and in Bandung, Yogyakarta, Makassar and Manado. In addition, we have collected 14,196 e-mails and 134,266 mobile phone numbers of campaign participants in our database in order to conduct random samplings and research on the degree to which our programme has influenced the belief systems of young people and guided them in making decisions when faced with offers of drugs.

4. We believe that all of our programmes must be measurably effective. Therefore, we have conducted extensive research on the knowledge level of our campaign participants, before and after campaigns are conducted. We are encouraged to know that most of them gain a better understanding of the dangers of drug abuse after having participated in our programmes.

09-62389

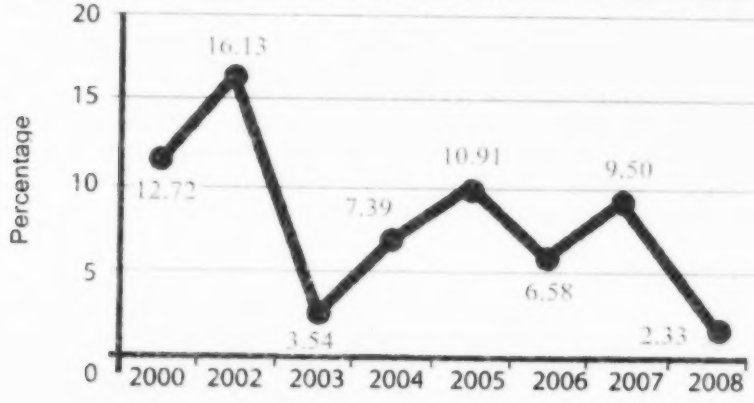
Figure I
Knowledge level of campaign participants



5. We also believe that there is a need to see the bigger picture of the trend towards drug experimentation among the young people in our society. Therefore, our research department has conducted a survey on this trend based on random samplings and questionnaires from our participants in Jakarta, asking them whether they have ever experimented with drugs.

6. Figure II below shows that in general, there has been a decrease in this trend.

Figure II
Level of drug experimentation among 12 to 16-year-olds in Jakarta, 2000-2008



7. The trend shows that, over the past eight years, there has been an overall decline in drug experimentation among young people. Thus, we can say that our campaign has, to some extent, met our expectations. However, we do not consider

this as a signal that we should reduce our campaign programme. To the contrary, we will have to intensify it, since the trend also shows some volatility in the level of drug experimentation among young people, indicating that they may require a close escort, so to speak, on their journey in order to resist drug abuse. Furthermore, we need to consider the fact that 12- to 16-year-olds change as they grow up. This means that the target audience of our campaign may need to be changed over time.

8. Over the years, we have also developed our prevention skills programme. In 2008, we succeeded in significantly reducing the cost per head of our prevention campaign, from Rp13,144 ($1.40) in 2004 to Rp4,981 ($0.50). That fact has encouraged us to enhance our ability by developing other kinds of programmes, which are described below.

Rumah Belajar (Learning House)

9. As our programmes developed, we began to see a clear link between poverty and drug abuse. Therefore, in 2003, YCAB established Rumah Belajar (Learning House) as an important component of our primary drug prevention strategy. Rumah Belajar offers affordable education and vocational training to street children in order to improve their lives through legitimate employment. We believe that, by enhancing the level of education of members of the impoverished community and by empowering them to help themselves, we can help them strive for a better and brighter future as individuals, members of a community and responsible citizens of Indonesia.

10. Since Rumah Belajar was established, in 2003, we have reached out to and taught more than 6,000 underprivileged school dropouts in six locations: Kebon Jeruk and Tegal Alur, in West Jakarta; Simprug Slump, in Central Jakarta; Koja, in North Jakarta; Cikarang, in West Java; and Aceh. A total of 2,099 children studied at our learning houses in 2008, and we have taught 1,865 students thus far in 2009.

11. More than half of our students are former street children who dropped out of formal schools long before they should have. The rest of them stopped going to school for economic reasons.

12. All students studying for packet A or packet C take the National Examination set by the Department of Education. We are very happy to send our graduates into the world, because approximately 80 per cent of our packet C graduates manage to secure employment. Even better news is that most of them earn more than our regional minimum wage. In addition, some of our graduates are able to pursue a higher education. In 2008, two students received full scholarships, from PT Asuransi Tokio Marine and Kasih Bangsa School of Economics, respectively.

Community development

13. The final step in our expansion has been to promote sustainable, income-generating development programmes in poor and disaster-stricken areas of Indonesia. These programmes contribute to improved health and better livelihoods in those communities.

14. Indonesia is still learning how to put its best foot forward in order to relieve the extreme poverty faced by a large percentage of its rural population — a problem compounded by the multiple natural disasters that we have experienced since 2005.

Our current efforts are focused on long-term sustainable development projects both in extremely impoverished areas and in areas devastated by natural disasters.

15. Research plays a vital preparatory role in this area of our work. Before we jump into what sometimes appear to be hopeless situations, we work hard to understand the situation faced by the community we are trying to help. The needs assessment carried out during the pre-project phase took longer than anticipated; more time was needed for the data collection and surveillance interview process, as well as for the analysis of all the data required by our Research Department. The difficulty resulted from the size and the nature of the communities involved in the study. The members of these communities were destitute, and their living arrangements were so improvised that tracking them was a great challenge. However, what is promising is that, in the midst of all of this, we managed to secure the cooperation of the International Labour Organization (ILO) for conditional cash transfer programmes to benefit the poorest residents of Jakarta. This programme is aimed at reducing the number of street children in Koja district, in Tanjung Priok, North Jakarta, and to help provide education at the junior high school level for these underprivileged children.

Domestic roles

16. Nearly all the endeavours of YCAB have involved the National Narcotics Board, the governmental agency that deals with the issues of illegal drug abuse and trafficking in Indonesia. On 26 June every year, YCAB celebrates the International Day against Drug Abuse and Illicit Trafficking by conducting a street campaign entitled "Lights On". The Board always lends its full support to this event, which reaches hundreds of thousands of people.

17. Since 2004, the National Narcotics Board has also supported the YCAB initiative to hold a journalism competition. The contest, first conducted in collaboration with the United Nations Information Centre (UNIC) and, since 2007, with the United Nations Office on Drugs and Crime (UNODC), awards prizes to journalists as an expression of appreciation for their support for and contributions to the fight against drug abuse.

18. To celebrate the eightieth anniversary of the Sumpah Pemuda declaration, YCAB, together with the National Narcotics Board, held a ceremony attended by President Susilo Bambang Yudhoyono himself. YCAB participated in the drafting and reading of an anti-drug declaration by 400 Jakarta school students. Furthermore, YCAB was entrusted by the Board with hosting the National Youth Congress, which saw the participation of 90 young people from 28 provinces, during the month of December 2008.

International roles

19. After receiving special consultative status with the Economic and Social Council in 2007, YCAB was given the opportunity to represent Indonesian non-governmental organizations on an international scale.

20. In 2008, we became a lead organization for the South-east Asian, East Asian and Pacific regions at the Beyond 2008 Non-governmental Organization (NGO) Forum. The Beyond 2008 consultation process is a unique mechanism. For the first time since the drafting of the three international drug conventions, in 1961, 1971

and 1988, civil society was invited to contribute to discussions aimed at enhancing global understanding of the impact of the conventions and providing future direction for their implementation at the national level. The roles and responsibilities related to that endeavour involved developing, managing and hosting the Beyond 2008 regional consultation. During a meeting of the Commission on Narcotic Drugs held in Vienna in 2008, we made a joint presentation to the NGO Forum on the drug situation in each region. We also attended a preliminary regional planning meeting on the margins of the 2007 session of the Commission. YCAB presented key findings from the regional consultation to the Beyond 2008 NGO Forum and also designated an NGO Committee Representative. This involved facilitating communication and management with regard to the planning and holding of the regional consultation, as well as acting as a liaison between the regional consultation leads and the Programme Committee of the Vienna NGO Committee on Narcotic Drugs.

21. We were privileged to represent the civil society sector and participate as delegates of the Republic of Indonesia in the fifty-second session of the Commission on Narcotic Drugs, held in Vienna from 11 to 20 March 2009.

International quality standard of management

22. In December 2008, YCAB received 9001:2000 certification from the International Organization for Standardization (ISO). The due diligence process had begun in 2007, and only after a rigorous process was this honour finally bestowed on us.

23. This was the first ISO certification, a quality standard related to operational and management practices, ever given to a local, Indonesia-based non-governmental organization. With this certificate, we hope to maintain the efficiency of our operations and a systematic process in our management in order to accelerate the betterment of our society.

Partnership

24. Over the years, YCAB has worked closely with many international partner organizations, such as UNODC, the United Nations Children's Fund (UNICEF), UNIC, United Nations Volunteers (UNV), ILO, the Colombo Plan secretariat and Wellspring. Our local partners include the National Narcotics Board, BNP, Yayasan Strada, Puskesmas Gambia, Habitat for Humanity, Next Step and Bina Nusantara University. In addition, we have been graciously supported by those in the private sector such as PT Multistrada Arah Sarana, PT Gajah Tunggal Tbk, Unilever, Telkomsel and Bimantara, and have received media assistance from the Media Group, MRA Group, the Prambors group, et cetera.

25. We are indeed thankful for all the support provided by our national and international partners, organizations, companies and individuals, in joining us in our quest to provide education regarding the dangers of drugs and to bring happiness and well-being to the lives of underprivileged families and children.

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Follow-up to the World Summit for Social Development and the twenty-fourth special session of the General Assembly: priority theme: social integration

Statement by the International Federation of Social Workers, a non-governmental organization in General Consultative Status with the Economic and Social Council

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

* E/CN.5/2010/1.

09-62346 (E) 141209

Please recycle

Statement

1. International Federation of Social Workers supports the theme of the forty-eighth meeting of the Commission for Social Development, "Promoting social integration", with special attention to social groups such as disabled persons, youth, ageing and the family. The Federation is a global organization representing over 750,000 social workers in 87 countries around the world. Our mission is to strive and advocate for social justice, human rights and social development through the practice of social work (www.ifsw.org).

2. Social integration as a concept speaks to all members of society having full access to opportunities, rights and services. Social cohesion should encompass all realms of society including cultural, social, political, economic and spiritual opportunities. Social integration should not imply the imposition of uniformity, but a respect for diversity, protection of human rights for all and equality of opportunity.

3. We support the Universal Declaration of Human Rights, which promotes equal rights and opportunities for all individuals regardless of their membership in specific social groups. We are also committed to the realization of the Millennium Development Goals, which are very much related to social work's promotion of human rights and social justice for all people. Certain social groups are at particular risk for extreme poverty (Millennium Development Goal 1) and educational deprivation (Millennium Development Goal 2). Special attention needs to be paid to those who are doubly vulnerable: women, migrants and indigenous peoples who are disabled, older or between the ages of 15 and 24 (youth). The Federation has policies on women, migrants, indigenous peoples, youth and older people that specifically relate to the needs and rights of these populations. The policy on women stresses the importance of equal educational opportunities for women. The Federation recommends that services for youth should be developed that strengthen relationships with families. The policy on ageing and older persons specifically states as a goal the "Promotion of full societal integration of older adults, including people with physical, psychological and cognitive disabilities, illnesses, and diseases, as well as intra- and international migrants — through lifelong learning, political participation, intergenerational relationships, cultural, social, and voluntary activities, and paid employment" (http://www.ifsw.org/p38000214.html).

4. We recommend the following:

- The Commission on Social Development should promote social integration by encouraging Governments and non-governmental organizations that foster participation and integration of women, disabled people, youth, older people, migrants and indigenous peoples into all levels of society.
- Funding needs to be committed for policies that support social integration of these groups to promote a more just and equitable society. These policies need to be all encompassing and should include housing, education, employment and social service programmes and policies.
- Decision-making on social integration approaches needs to be conducted in a participatory approach, which includes the voices of all groups and members of society. Women, disabled people, youth, older people, migrants and indigenous peoples should participate in decision-making about programmes and policies that affect them.

- Social workers all over the world are involved in providing services to women, disabled people, youth, older people, migrants and indigenous peoples. We believe that national and international policies must be directed towards developing social and economic programmes to help these groups. The Federation considers the following types of social development programmes to be of particular importance:
    - Education and lifelong learning programmes. Too often older people, youth, and disabled people lack educational access. Programmes that increase access and work towards providing educational opportunities need to be supported.
    - Educational and employment programmes that provide support for those whose physical, mental or emotional problems or caring responsibilities prevent them from maximizing opportunities.
    - Economic and social protection both for those who are able and those unable to pursue educational and employment opportunities.
    - Programmes that promote job training and literacy should be supported.
    - Educational programmes that strive to achieve the Millennium Development Goal of securing an eighth grade education for all people, but especially those who are frequently marginalized — disabled, older people, and youth.
    - Consultation with local communities and civil society organizations and the active involvement of "excluded" individuals and communities in decisions which affect them.
    - Programmes that specifically serve to focus on the physical and mental health needs of women, migrants, disabled people and youth need to be developed and supported by national and international groups.
    - Community education initiatives that advocate for human rights and strive to inform all persons of their basic human rights and the inherent dignity and worth of every individual.
    - Community-building initiatives that promote the involvement of social groups in advancing their own well-being.

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Statement by Leonard Cheshire Disability, a non-governmental organization in consultative status with the Economic and Social Council

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

* E/CN.5/2010/1.

09-62491 (E) 080110

Please recycle

Statement

1. 2010 is a crucial year for all who work to combat poverty, improve living standards and build social integration. With five years to go and subject to a major review, the Millennium Development Goals are rightly the focus of many at this time. However, the Goals are failing many of the people they were designed to help because they are not included in the goals, targets and indicators.

2. Approximately one person in ten has a disability. In the wealthy developed world and the developing world alike, they make up the poorest segment of the population and, globally, they are more likely to be among the poorest of the world's poor. The reasons for this are many and varied, but one of the root causes is the discriminatory barriers that society puts in their way (access to education, health care, employment, human rights and legal redress).

3. By denying people with disabilities the possibility of playing a full and active part in society, society deprives itself of the economic and cultural benefits having 10 per cent of its population fully socially and economically integrated.

4. The United Nations and its Member States have acknowledged that this discrimination must be addressed; the Convention on the Rights of Persons with Disabilities is an instrument that enables people with disabilities to finally become socially integrated. Other initiatives such as the World Programme of Action concerning Disabled Persons are also welcome.

5. The review of the Millennium Development Goals in 2010 provides an important opportunity to incorporate and mainstream the principles of the Convention on the Rights of Persons with Disabilities into all efforts to deliver on the Goals.

6. Leonard Cheshire Disability welcomes the resolution of the sixty-fourth session of the General Assembly on realizing the Millennium Development Goals for persons with disabilities.[1]

7. Leonard Cheshire Disability calls for:

1. On the Millennium Development Goals

(a) More awareness within the Millennium Development Goal monitoring and reporting bodies of what the Goals mean for people with disabilities, specifically that the Goals will not be met by 2015 if the needs of people with disabilities are not included. The website www.includeeverybody.org is a good resource;

(b) The inclusion of disaggregated data on disability within Millennium Development Goal reporting mechanisms; for example, when looking at Goal 2, universal primary school education, the number of children with disabilities enrolled in primary education should be taken into account;

(c) The mainstreaming of people with disabilities into poverty-eradication programmes and programmes for achieving the Millennium Development Goal targets at the national level, including national development strategies, poverty reduction plans, country assistance plans and other aid mechanisms;

[1] See A/C.3/64/L.5/Rev.1.

(d) A post-2015 international development system that is genuinely inclusive and actively seeks to address the fact that people with disabilities are disproportionately more likely to live in poverty.

2. On the Convention on the Rights of Persons with Disabilities

(a) The speedy signing, ratification and national implementation of the Convention on the Rights of Persons with Disabilities by all countries;

(b) The involvement of people with disabilities and civil society in the monitoring of the implementation processes, including shadow reporting;

(c) The mainstreaming of the Convention into all pertinent United Nations initiatives, including the World Programme of Action concerning Disabled Persons, the World Programme of Action for Youth to the Year 2000 and Beyond and the Madrid International Plan of Action on Ageing, 2002.

3. On access to education and health care

All Governments to take steps to provide birth certificates and other necessary registration documents for all children, including those with disabilities, so that they can access education and vital health care and social services. Too many children with disabilities are invisible in their societies and are unable to escape from a life of poverty and dependency because they do not have the documents they need. In certain countries, this is a major barrier to education for all and access to health care for people with disabilities.

About Us

8. Leonard Cheshire Disability[2] is a non-governmental organization with special consultative status at the Economic and Social Council. We have particular expertise in the field of inclusive education, livelihoods, support for everyday living, capacity-building of local partners and campaigning and advocacy. With our partners in the Leonard Cheshire Disability Global Alliance in 53 countries, we offer a package of services that empowers people with disabilities and increases their life opportunities. An evidence base for our policy and programmes is provided by the Leonard Cheshire Disability and Inclusive Development Centre, which is run jointly with University College London (UCL), United Kingdom.

9. The head office of Leonard Cheshire Disability is located at 66 South Lambeth Road, London SW8 1RL, United Kingdom. Website: www.LCDisability.org/international; e-mail: international@lcdisability.org.

10. Leonard Cheshire Disability is a member of the International Disability and Development Consortium and the Global Partnership on Disability and Development.

[2] Founded in 1948 and registered as a charity in England and Wales (218186) and Scotland (SCO05117), with regional offices in East Asia, South Asia, West Africa, East and North Africa, Southern Africa and the Americas.

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Statement submitted by the Worldwide Organization for Women, the World Federation of Ukrainian Women's Organizations, the Universal Peace Federation, the Women's Federation for World Peace, the Foundation for the Support of the United Nations, the International Federation for Home Economics and the International Federation of University Women, members of the Non-governmental Organization Committee on the Family in New York in consultative status with the Economic and Social Council

As members of the Non-governmental Organization Committee on the Family in New York, we are committed to addressing issues and policies that impact the advancement of families within the context of the United Nations system

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

* E/CN.5/2010/1.

09-62533 (E) 291209

Please recycle

Statement

1. As non-governmental organizations globally involved with families, we applaud the Commission for Social Development for setting, for the second year in a row, the theme for its session as "Promoting social integration", with special attention to issues of poverty eradication as well as full employment and decent work for all. In addition, we believe it is admirable that the Commission is promoting gender equality and fostering social integration for young people, persons with disabilities and older persons, as well as migrants and indigenous peoples.

2. Capacity-building, economic development and social integration require funding and technical support from Member States and donors. The solidarity within and among families in a community can facilitate social integration and result in the stability and continuity necessary for social and economic development.

3. We make the following recommendations.

4. The Commission for Social Development should support and strengthen human capital by allocating funding to organizations that promote social inclusion and integration. Special attention should be given to promoting the role of the family in the area of gender equality, including with regard to those members with special mental and physical needs. In addition, indigenous people, young people and the elderly, as well as migrant workers and their families, should be empowered with a view to addressing development issues. During periods of armed conflict and in the post-conflict phase, the reconstruction of damaged or destroyed social sectors, including health, education and social service institutions, is essential in order to support the long-term processes of social healing and social integration. Member States, non-governmental organizations, the private sector and other stakeholders should actively support, promote and protect the right to employment, food security, housing and health.

Participatory approaches

5. Families should play an instrumental role in decision-making with regard to the development, implementation and evaluation of policies and programmes that affect them. The participation of families, as well as the social integration of all groups, can contribute to a sense of community and programme sustainability.

Economic development and education

6. It is imperative that Member States provide funding and technical support for the economic development and economic education of families and help them learn about the best practices followed in well-managed economic programmes. New technologies and such media as television and radio should be used to foster knowledge-sharing within and between families. In order to promote the sustainability of approaches aimed at economic development, it is necessary to provide access to markets for both men and women, as well as marginalized groups. Specifically, Governments should enhance their investment in research-based best practices, such as cash transfer programmes, the microcredit financing provided by the United Nations Development Fund for Women, and incentives in the form of education grants. Such programmes have measurably improved gender equality and

the economic self-sufficiency of families and can break the cycle of intergenerational poverty.

Workplace environment

7. It is crucial that opportunities for employment and training be provided for both men and women as well as for members of socially marginalized groups, including individuals with disabilities. Member States should allocate funds and enforce regulations with a view to promoting safe working environments in which workers are guaranteed healthful working conditions, equity and justice.

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Follow-up to the World Summit for Social Development and the twenty-fourth special session of the General Assembly: priority theme: social integration

Statement by Misión Mujer A.C., a non-governmental organization in consultative status with the Economic and Social Council

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

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Statement

Adolescents: a challenge to comprehensive development

1. Teenage pregnancy is an issue currently facing youths worldwide. It imposes responsibilities on them for which they are socially unprepared because adolescence constitutes a moratorium with regard to the psychosexual capacity for intimacy and the psychosocial readiness to become parents.[1] They prematurely pass from adolescence into adulthood. Adolescent girls find themselves becoming mothers without any preparation. With this unexpected situation come a host of social and personal frustrations that force them to make an abrupt change in their life plans.

2. In the Americas region, the average age for the commencement of sexual activity is 14 years; half of all adolescents under 17 years of age are sexually active. According to the Ministry of Public Education, in our country [Mexico] there are 9,579 adolescents between 12 and 18 years of age who are at risk of dropping out of primary or secondary school because they are pregnant or are young mothers.[2] Moreover, in 2009, according to the Mexican Ministry of Health, 18 out of every 100 registered births were to women less than 20 years of age. Given that this number has not decreased over the last 10 years, but has actually gone up, the issue is increasingly becoming a public health challenge, in addition to its social, economic and familial repercussions.

3. Teenage pregnancy is an obstacle to the comprehensive development of adolescents in Mexico and in a number of countries around the world. A pregnant teenager is socially stigmatized and forced to remain at home or begin working, something for which she is not yet prepared. The stigma that is attached to her child, which varies according to social group, turns the child into a problem. Being a teenage mother means having to leave school and wrestle with underemployment, mistreatment, frustration and resentment, which, in turn, force teenage girls to change their life plans.[3]

4. Although the consequences of teenage motherhood are obvious, the reasons and motives for deciding to have sexual relations at such an early age, without using contraceptives, are confusing and numerous.

5. Among the many possible reasons are: the early start of sexual activity among youths; insufficient training; lack of adequate information on sexuality; low educational and economic level; poor planning and low expectations of youths with regard to their future (life plan); the poor image of women and the lack of appreciation for them; feelings of loneliness and rejection; the inability to deal with emotions; emotional dependency; the lack of awareness and preparation when taking decisions; the sexualization of adolescents, as a result of which their sense of worth is socially linked to their physical attractiveness; or the absence of mothers and fathers who are committed to the comprehensive development of their children.

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[1] Erikson, E., Sociedad y Adolescencia (Mexico City, Siglo XXI Editors, S.A. de C.V., 1986).

[2] Nurit Martínez. "Preocupa deserción escolar de adolescentes embarazadas", El Universal (Mexico), 25 May 2005. Available at: www2.eluniversal.com.mx/pls/impreso/noticia.html?id_nota=125440&tabla=nacion (consulted on 18 November 2009).

[3] Soto de Jesús, Maribel, "Los cambios en el proyecto de vida de la adolescente embarazada", Mexico, available at: www.adolescenciasema.org/index.php?menu=documentos&id=44&id_doc=209&show=1, 2007 (consulted on 18 November 2009).

In view of the above, one may conclude that the issue of teenage pregnancy is multifaceted. A study done by Maribel Soto de Jesús and others found that adolescents:

- View themselves as objects rather than moral or ethical beings;
- Lack self-confidence and security;
- Are not capable of resisting pressure to have sexual relations;
- Are afraid of rejection;
- Believe that they are invulnerable and that nothing will happen to them, because such things only happen to others;
- Sometimes use pregnancy as a means of avoiding family problems and getting out of the house in order to start their own families, which usually end in failure;
- Have low ambitions in life;
- Have very few plans for themselves;
- Seek to temporarily fill the emotional void in their lives through their partners;
- Have little interest in school, family or community activities;
- Succumb to the desire to feel pleasure or to engage in spontaneous sexual intercourse;
- Lack personal values and self-esteem and are insecure and afraid of being abandoned by their partners if they do not consent to sexual activity (however, they are usually abandoned anyway);
- Come from families that are dysfunctional or lack a father figure. A difficult and conflictual family setting may lead adolescents to believe that sexual activity, in addition to providing a source of pleasant company, offers the possibility of pregnancy as a means of escape and an opportunity to start a new life, which generally does not come to pass. Pregnancy, however, complicates the rest of their adolescence.

6. Teenage pregnancies are not only a tragedy or a social expression of the problems of adolescent girls, but also a reflection of the combined pressures and limited options available to help them manage the associated risks, starting with acceptance of their new situation and awareness of the need to face reality and understand that from the moment they know they are pregnant, their lives will never be the same. It is not easy for pregnant girls to face their parents, friends and society in general.

7. The proposals we have developed are the product of our 10 years of experience as a non-governmental organization providing care and preventive training for approximately 18,000 adolescents in public secondary schools, and through the "Axios" values programme. Our approach to this issue takes into account the actual situation and not only theoretical assumptions.

8. It is not enough to give adolescent girls information about their sexuality. Adolescents, both male and female, also need more life opportunities, especially with regard to decision-making and life planning, which are two underlying factors

in adolescence that can protect vulnerable teenagers from situations that are difficult to cope with at their age, such as pregnancy.

9. Efforts should be made to influence the life plans of both male and female adolescents, and to motivate them to have valid reasons for postponing the early onset of sexual activity, so that their self-worth and interest in life take precedence over being mothers and fathers at an early age. This includes encouraging adolescents to plan and carry out appropriate actions, and building positive social networks which foster appropriate decision-making, so that they are capable of thinking about their actions and making mature decisions.

10. Society should be educated about the importance of having a father figure in the home, where this is conducive to a harmonious relationship between the parents (since this is one of the major factors in the prevention of teenage pregnancies), and the need for him to have a closer and better relationship with his children. There is an emotional interaction, without social prejudice, in which the father figure's presence and actions in the home are important and significant, not only as "the male family breadwinner", but also as the "male who moulds the family".

11. Adolescents should be encouraged to receive preventive training in the values, knowledge and services that will empower them.

12. Families should be encouraged to participate in the comprehensive sexual education of their children and, in society at large, it is incumbent upon all of us to raise our awareness about this issue, which is part of the social fabric.